

Anxiety Disorders

What are anxiety disorders?

Everyone knows what it's like to feel anxious-the "butterflies" in your stomach before that first date, the "jitters" before giving a speech, the sweaty palms or racing heartbeat that often accompany challenging or dangerous situations. These feelings are normal.

But what if you were to find yourself feeling anxious most of the time instead of just under specific circumstances? What if you couldn't even find a particular reason for feeling this way? What if you found yourself avoiding certain everyday routines or activities altogether in an effort to curb the stressful feelings they cause? What if you simply were to become "paralyzed" by your own nervousness? This is what life is often like for those suffering from one of the group of biologically based mental illnesses known as anxiety disorders.

What are the different types of anxiety disorders?

Panic disorder

Those suffering from panic disorder experience reoccurring and unexpected panic attacks-instances of extreme fear or discomfort that start abruptly and build to a rapid peak, usually within ten minutes. Panic attacks are characterized by such physical symptoms as heart palpitations, sweating, trembling, shortness of breath, the sensation of choking, chest pain, nausea, dizziness, disorientation, fear of losing control or dying, numbness, chills, and hot flushes. Additionally, panic attacks are usually accompanied by a sense of looming danger and the strong desire to escape. Attacks can be brought on by specific triggers or can occur "out of the blue." The frequency of attacks tends to vary according to the individual.

To be diagnosed with panic disorder, one's panic attacks must have been followed by at least one month of steady worry about having more attacks, concern about why the attacks have happened and what they mean (fears of having a serious physical illness or "losing one's mind" are common), or a significant change in behavior brought about by the attacks (many feel the need to avoid certain situations or remove themselves from particular environments).

Panic disorder is diagnosed more often in women than in men and, although the age of onset varies considerably, is most commonly experienced for the first time between late adolescence and the mid-30s. Up to one-half of those diagnosed with panic disorder also have agoraphobia (see below).

Phobias

Defined as exaggerated, involuntary, and irrational fears of particular situations or things, phobias are generally divided into three separate types.

- Specific (or simple) phobia: This type of phobia is brought about by a specific object or situation such as flying, heights, needles, or snakes. Specific phobias are generally more common in women than in men and usually first appear during childhood.
- Social phobia (social anxiety disorder): Limited specifically to social situations, this particular phobia is typified by extreme fear of meeting new people and of being embarrassed, humiliated, or judged by others. Social phobia appears to be diagnosed equally among the sexes. Usually first appearing in the mid-teens, social phobia sometimes arises from a history of childhood shyness.
 - o A diagnosis of specific or social phobia requires that exposure to the feared object or situation induces anxiety (often in the form of panic attacks), that the individual experiencing the phobia recognizes the irrational nature of their fear, and that the anxiety caused by the phobia becomes disruptive to the individual's lifestyle.
- Agoraphobia: Those with agoraphobia have an intense fear of being trapped in particular places or situations or of not being able to find help if they experience anxiety or a panic attack. Fears of those with this type of phobia often center around being alone in an open area or being in a large crowd. Often, those with agoraphobia avoid such situations altogether; being subjected to such situations causes notable anxiety or panic.

It is important to remember that diagnosed phobias cause severe impairment - everyone has certain fears and experiences times of shyness and anxiety.

Obsessive-compulsive disorder (OCD)

OCD is an anxiety disorder characterized by persistently intrusive and inappropriate thoughts, impulses, or images that run through one's mind (obsessions) and repetitive behaviors that one feels they must do (compulsions). Common obsessions include fear of contamination, fixation on lucky or unlucky numbers, fear of danger to oneself or others, need for order or exactness, and excessive doubt. The most common compulsions

performed in response to these obsessions include ritualistic handwashing, counting, checking, hoarding, and arranging.

Although most people experience such thoughts and behaviors at some times, OCD is considered to occur when these obsessions and compulsions are experienced for more than an hour each day in a way that interferes with one's life or causes great anxiety.

Equally common in males and females, OCD often appears earlier in males. Generally, the disorder first begins in adolescence or early adulthood, although it may start in childhood.

Posttraumatic stress disorder (PTSD)

Personally experiencing or witnessing a violent or tragic event that resulted in feelings of intense fear, helplessness, or horror can sometimes cause PTSD. Events that often lead to the development of this anxiety disorder include rape, war, natural disasters, abuse, and serious accidents. While it is common to experience a brief state of anxiety or depression after such occurrences, those with PTSD continually re-experience the traumatic event through ways such as nightmares, hallucinations, or flashbacks; avoid all things associated with the event (often displaying an accompanying sense of detachment); and exhibit increased arousal (e.g., difficulty sleeping, irritability, difficulty concentrating, extreme alertness, jumpiness).

Those diagnosed with PTSD experience symptoms for longer than one month and are unable to function as they did before the event. PTSD usually appears within three months of the traumatic experience, but in some circumstances can surface months or even years later. PTSD can occur at any age.

Similar to PTSD is an anxiety disorder known as acute stress disorder. Also in response to a traumatic event, acute stress disorder involves symptoms of re-experience, avoidance, and increased arousal as well.

The main difference between the two disorders is twofold. First of all, acute stress disorder features a greater element of dissociation-those with the disorder experience detachment, a sense of withdrawal from reality, or, even sometimes amnesia. The other major distinction between PTSD and acute stress disorder is in the length of time the symptoms are experienced. Acute stress disorder is only diagnosed if the disturbance occurs within four weeks of the traumatic event and lasts for a minimum of two days and a maximum of four weeks. What is first sometimes thought to be acute stress disorder is often eventually diagnosed as PTSD.

Generalized anxiety disorder (GAD)

Individuals with GAD experience excessive anxiety and worry about several everyday events or activities. Furthermore, the anxiety in those with GAD is difficult to control and causes notable complications in daily work and social settings. Physical symptoms of the disorder include edginess, fatigue, difficulty concentrating, irritability, muscle tension, and sleep disturbances. To be diagnosed with GAD, one must experience this excessive anxiety for the majority of days during a period of six months or longer.

Most of those with GAD claim to have felt anxious for their entire lives, and the disorder is often first seen in childhood or adolescence. However, adult onset of the disorder is not uncommon.

Other anxiety disorders

Certain persons can experience anxiety in response to a general medical condition or from substance abuse. Others exhibit certain signs of particular anxiety disorders without meeting all the criteria for an official diagnosis.

How common are anxiety disorders?

Anxiety disorders are the most common mental illnesses in the United States. These serious brain disorders are estimated to affect more than 20 million Americans (approximately one in nine) every year.

Are anxiety disorders associated with other disorders?

Most definitely. It is quite common for one anxiety disorder to coexist with another or several others. Furthermore, those with anxiety disorders frequently also suffer from depression, substance-related disorders, and/or eating disorders. In fact, it is estimated that over half of those diagnosed with panic disorder or OCD have depression too.

What causes anxiety disorders?

Several factors seem to contribute to the development of an anxiety disorder. Much new research suggests that these disorders both run in families and are the result of one's brain chemistry. Certain life experiences and one's general personality are also thought to influence the likelihood of having an anxiety disorder.

How can anxiety disorders be treated?

Effective treatments are available for anxiety disorders-those experiencing symptoms should consult their physician and not feel condemned to their illness. While the symptoms of the various anxiety disorders do differ, both medication and talk therapy have proven helpful in alleviating many of the problems of those faced with each of these illnesses.

The most common medications used to treat anxiety disorders are antidepressants and benzodiazepines. There are a variety of drugs of both types that have proven quite helpful. So, if a particular medication does not seem to work, others are available. And, many new drugs are on the horizon. As always, one should speak with their doctor about any medication questions or concerns.

The forms of talk therapy most often effective in treating anxiety disorders are behavioral therapy and cognitive-behavioral therapy. Behavioral therapy involves relaxation techniques and gradual exposure to the thing or situation that causes the anxiety in an attempt to reduce that anxiety. Cognitive-behavioral therapy works on helping individuals react differently to what causes them anxiety by changing their thinking patterns.